ACUSHNET COMPANY RUBBER DIVISION

Manufacturers of Elastomeric Products

March 26,1991

MAR 28 1991

Environmental Protection Agency Permits Processing Section P.O. Box 8127 Boston,Ma. 02114

Gentlemen;

Enclosed please find copies of our discharge monitoring report for our NPDES permit No. MA 0003913001 for the month of January, 1991.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your a assistance.

Sincerely:

ACUSHNET COMPANY

Robert G. Morris

Environmental Compliance Specialist

Name

ACUSHNET COMPANY-RUBBER DIVISION-PLANT B

Street

744 Belleville Ave.

City

SŤ

New Bedford

PERMIT NUMBER

State/Zip code MA 02742

Telephone number (including area code) 508-997-2811 (2-3) MA 0003913

001 DIS

(20-21)

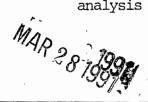
9 1

REPORTING PERIOD: FROM

(22-23)	(24-25)	•	(2	6-27)	(26-29)	(30-31)
011	0 1	ŧο	9	11	0 1	3 1
МО	DAY		Y	EAR	МО	DAY

see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory *The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis



•			YEAR MO DA			DAY								
	(32- 37)	· ·	(3 card only) (38-45)	QUANT	TTY (84-61)			(4 card only)	CONCENT	RATION		(62-63)	FREQUENCY	(69-70) SAMPLE
	PARAMETER . /		MINIMUM	AVERAGE	MAXIMUM	UNITS	NO.	MINIMUM	AVERAGE	MAXIMUM .	UNITS	NO.	OF ANALYSIS	TYPE
	FLOW	REPORTED	.0099	.054	.152	MGD						0	30/30	24 hour continuo
	TIOW	PERMIT CONDITION									Ì			
	OIL & GREASE	REPORTED	·	0.23		LBS/								
		PERMIT CONDITION	343		9,3	DAY								
	T.S.S.	REPORTED		0.18		LBS/								
	1.0.0.	PERM:T CONDITION	9,0		18.0	DAY								
	C.O.D.	REPORTED							< 60 .		14C /T	0	1/30	24 hour composite
		PERMIT CONDITION							MONITOR		MG/L			
	PH	REPORTED							6.6		STD.	2	12/30	24 hour composite
		PERMIT CONDITION				×		6.5		8,0	UNIT	5		
	C.R.	REPORTED							<0.2		MG/L		1/90	24 hour composite
		PERMIT CONDITION									143/11	22.85 23.75		
		REPORTED				_								
		PERMIT CONDITION												
		REPORTED												
		PERMIT												
	NAME OF PRINCIPAL EXECUTIVE	OFFICER	TITLE	F THE OFFICER		DATE	I certify that I am familiar with the information contained in this						11/10	Pis
	DUBIEL, Rober		Preside		9 1	OB 2 16	report		est of my knowled		Infor U		RE OF PRINCIPA	
L	AST FIRST	MI		TITLE	YEAR	MO DAY	<u></u>					OFFICE	R OR AUTHORIZ	ED AGENT

Read these instructions before completing form:

After reading and understanding instructions and forms, please return acknowledgement card.

Sampling and testing procedures should follow those published in 40 C.F.R. 136. These are basically <u>Standard Methods</u> or EPA procedures.

Forms should be completed in triplicate for each discharge with copy each for EPA, state and your records. If the state requires a more frequent submittal than EPA, collate EPA's copies and send as required.

Enter permittee name and facility address, PERMIT NUMBER, discharge number and reporting period. (A separate page is required for each discharge.)

For each parameter monitored during the reporting period, (either as a requirement of the permit or for own information) summarize the data as required in the permit and complete the form as follows:

- 1. Parameter column list parameter name.
- Enter minimum, average and maximum values for quantity and/or concentration under appropriate column headings.
 - a. If frequency is once per month or less, enter the one value under average and leave minimum and maximum blank.
 - b. 1b/day (pounds per day) equal_s flow (in million gallons per day) times concentration (in mg/l) times 8.34.
 Example: 2.5 MGD x 30 mg/l BOD x 8.34 = 625.5 lb BOD/day
 - c. MGD equals gallons per minute times 1/40.
- 3. Enter units as appropriate.

MGD - million gallons per day
lb/day - pounds per day
mg/l - milligrams per liter
SU - standard units for pH
°F - degrees fahrenheit
kg/day - kilograms/day = 1b/day
2.2

(other units may be used as necessary)

- 4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "O". If there are any violations, send a letter of explanation.
- 5. Specify frequency of analysis as number of analyses/ number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly & 1/180 is semiannually) If continuous, enter "CONT"
- 6. Specify sample type ("grab" or "hr. composite") If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

Mail state copy to appropriate state agency and EPA copy to

Environmental Protection Agency Permits Branch Box 8127 Boston, MA 02114

When supply of forms will be exhausted within 2 months, send reorder form or reproduce forms yourself.



CERTIFICATE OF ANALYSIS

February 25, 1991

Results

TO:

Refressions

SUBJECT:

MONTHLY ANALYSIS OF 21 INCH OUTFALL FOR PH, TSS, COD, O & G

AND CHROMIUM

SAMPLE DESCRIPTION: 12 sample bottles from 21 inch outfall.

The above samples were composited and analyzed EXPERIMENTAL:

according to the procedures found in "Standard Methods." The sample was analyzed 2-4-91.

Parameters RESULTS:

> PH TSS COD O & G

> > CR

6.6 SU 0.4 mg/l<60 mg/l0.50 mg/l< 0.2 mg/l

Mark Wrigley

Review

TIME: 8 Hours \$ 200.00 COST:

mark W

REQUEST FOR ANALYTICAL SERVICES CA9/- 010R
TITLEIST GOLF DIVISION

REQUESTED BY:	Cloreis	DATE	. <u>/-30-</u> 91
DEPT.: 241	· · · · · · · · · · · · · · · · · · ·	EXT.	:
PROJECT NAME/NUMBER:	·		
SUBJECT (WHAT/WHY):	PIERSE CHECK F	OR PH	755 COD,
OIL, SACTOSE, I	ENTICONITO WIL	······································	
SAMPLE DESCRIPTION:	S SMIRE BOT	718 F	em
THE 21 INCH	OUT FALL.		
	6.6 6.6 6.6 6.6 6.7	6.6 6.7	
PRIORITY:			· · · ·
	be returned to the required for the following		-
, -	TITIVE REPORT	MAR 28	1991
B) PATEN	T STUDIES SAMPLES	MARO	•
	ANALYTICAL DEPT. USE		
TESTING PERFORMED	RESULTS	ANALYST	NOTEBOOK PAGE NO.
1. <u>Ph</u>	<u>6.6 SU</u>	M.W.	46 CA430-6
	=	M. ()	0.4.0.
2		111.W	CA4.30-61
3. <u>Cob</u>	_ LGomg/S	m ()	CA420-61
			
4. 0+G	0.50 mg/S	M.W.	CA420-61
-			V.
5. <u>CZ</u>		M.U.	CAH20-61
	— Date Co	ompleted:	·
REV. 1/90	Total #	of Hrs.:_	



ACUSHNET COMPANY RUBBER DIVISION

APR 23 1991

Manufacturers of Elastomeric Products

April 22,1991

Environmental Protection Agency Permits Processing Section P.O. Box 8127 Boston,Ma. 02114

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES permit No. MA 0003913001 for the month of March,1991 February,1991

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your a assistance.

Sincerely:

ACUSHNET COMPANY

Robert G. Morris

Environmental Compliance Specialist

CERTIFICATE OF ANALYSIS

APR 23 1991

TO:

_Robert Morris

SUBJECT: Monthly analysis of effluent water from 21 inch outfall

SAMPLE DESCRIPTION: 12 samples bottles from the 21 inch outfall.

EXPERIMENTAL: The above 12 samples were composited into one sample which was analyed according to the procedures found in "Standard Methods". The sample was analyzed 03/07/91.

RESULTS:	PARAMETER	RESULTS
	Ph	6.8 ave.
	Oil&Grease	<0.2 mg/l
. '	Chromium	N.D.
	TSS	0.3 mg/l
	COD	<60 mg/l

REVIEW

ANALYSIS TIME - 8hrs

ANALYSIS COST - \$200.00

REQUEST FOR ANALYTICAL SERVICES (1991 - 0166TITLEIST GOLF DIVISION

REQUESTED BY:	lorris	DATE. 2-27-
DEPT.:	· · · · · · · · · · · · · · · · · · ·	EXT.: 3368
PROJECT NAME/NUMBER:		
SUBJECT (WHAT/WHY):	CORE CHECK FOR	OR OH T.S.S.
SAMPLE DESCRIPTION: /	L SAMPLE L	ETTLES FROM
PRIORITY: <i>PH</i> 7.1 6.9	6.8 6.7 6.8 6.8 6.8	6.8 6.8 6.8 6.9
SAMPLE DISPOSITION: All samples will be is issued, except for A) COMPETITE B) PATENT SO C) WATER SAMPLES	r the following IVE REPORT TUDIES	ester when the report
	ALYTICAL DEPT. USE	
TESTING PERFORMED	RESULTS	ANALYST PAGE NO.
1		
2.		
3.		
4.		
5.		
J		
		mpleted:



CA91-025R

Lot# 20-91

3/28/91



CERTIFICATE OF ANALYSIS

TO:

Robert Morris

SUBJECT: The Monthly Analysis of the 21inch Outfall wastewater effluent for Ph, TSS, COD, Oil & Grease, and Chromium.

SAMPLE DESCRIPTION: 12 samples of wastewater effluent from the 21 inch
Outfall submitted 3/28/91.

EXPERIMENTAL: The above samples were composited and analyzed according to the procedures found in "Standard Methods". The sample was analyzed on 3/28/91.

RESULTS:	<u>Parameters</u>	<u>Results</u>			
	Ph	6.8 SU			
	TSS	0.3 mg/l			
	COD	<60.0 mg/l			
	Oil & Grease	<0.2 mg/l			
÷	Chromium	<0.003 mg/l			

REVIEW

ANALYSIS TIME - 8 hrs

ANALYSIS COST \$ 200.00

REJEST FOR ANALYTICAL SERVICE TITLEIST GOLF DIVISION

REQUESTED BY: //	necis	DATE.	3-28-91
DEPT.:	<u></u>	EXT.:	4142
PROJECT NAME/NUMBER:	·		- 5.5
SUBJECT (WHAT/WHY):	COSE CHECK FOR	RPH, T.	SS., C.O.D.
			·
SAMPLE DESCRIPTION:	I Smurces P	ROM THE	= 21/104
PRIORITY: PH 7.0 6.9 6.	.8 6.8 6.8 6.8 6.8 6.	8 6.9 6.9 6	.8 6.9
is issued, except for A) COMPETING	TIVE REPORT	ester when	the report
B) PATENT S C) WATER SA			. •
Al	NALYTICAL DEPT. USE		NOMED 007
TESTING PERFORMED	RESULTS	ANALYST	NOTEBOOK PAGE NO.
1.	· —————————	·	
	:		•
2			
3.			
4.			
5		<u></u>	
	Date Co	ompleted:	1. 4

REV. 1/90

Name

ACUSHNET COMPANY-RUBBER DIVISION-PLANT B

Street

744 Belleville Ave.

New Bedford

State/Zip code MA 02742

Telephone number (including area code) 508-997-2811

MA ST

0003913 PERMIT NUMBER 001 DIS

REPORTING PERIOD: FROM

(20-21) (22-23) (24-25)

(26-27) (28-29) (30-31)

see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory *The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

. (32-37)		YEAR MO DA	<u> </u>	YEAR MO	DAY				•			(54-68)	(49-70)
		(3 card only) (38-45)	QUANT	TTY (54-61)			(4 cerd only) (38-45)	CONCENT	RATION (54-61)		(62-63)	FREQUENCY	SAMPLE
PARAMETER .		MINIMUM	AVERAGE	MAXIMUM	UNITS	NO.	мінімим	AVERAGE	MAXIMUM	UNITS	NO.	ANALYSIS	TYPE
FLOW	REPORTED	.0031	.033	.083	MGD		44				0	30/30	24 hour continuo
12011	PERMIT CONDITION				, AOD					<u>.</u>			
OIL & GREASE	REPORTED		0.06		LBS/						·	· ·	\
	PERMIT CONDITION	343		9.3	DAY								
T.S.S.	REPORTED		0.08		LBS/		:					·. ·. ·.	
	PERMIT CONDITION	9.0		18.0	DAY								
C.O.D.	REPORTED					· .		60.0		MC /T	0	1/30	24 hour composit
	PERMIT CONDITION							MONITOR		MG/L r			
РН	REPORTED							6.8		STD.	2	12/30	24 hour composit
	PERMIT CONDITION						6.5		8.0	UNITS			
C.R.	REPORTED						<i>!</i>	0.0		MG/L		1/90	24 hour composit
	PERMIT CONDITION									110/11	200		
	REPORTED			,								·	
	PERMIT CONDITION												
	REPORTED		,				~~~					***************************************	
	PERMIT												
NAME OF PRINCIPAL EXECUTIVE	OFFICER		F THE OFFICER		DATE			liar with the infor			2	llak	eks
DUBIEL, Robert	. MI	Preside	nt	91 (0 4 2 2	report matio	and that to the b	est of my knowled, e, and accurate.	ge and belief such	210		E OF PRINCIPA	

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 Example: 2.5 MGD x 30 mg/l BOD x 8.34 = 625.5 1b BOD/day
 - c. MGD equals gallons per minute times 1/40.
- 3. Enter units as appropriate.

MGD - million gallons per day
lb/day - pounds per day
mg/l - milligrams per liter
SU - standard units for pH
°F - degrees fahrenheit
kg/day - kilograms/day = lb/day
2.2

(other units may be used as necessary)

- 4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "0". If there are any violations, send a letter of explanation.
- 5. Specify frequency of analysis as number of analyses/ number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly 6 1/180 is semiannually) If continuous, enter "CONT"
- Specify sample type ("grab" or "hr. composite")
 If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

Mail state copy to appropriate state agency and EPA copy to

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Name

ACUSHNET COMPANY-RUBBER DIVISION-PLANT B

Street

744 Belleville Ave.

City

New Bedford

State/Zip code MA 02742

Telephone number (including area code) 508-997-2811

MA ST

0003913 PERMIT NUMBER 001 DIS

REPORTING PERIOD: FROM

(20-21) (22-23) (24-25)

APR 23 1991

see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory *The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

			YEAR MO DA	AY	YEAR MO D	AY								
(32-			(3 card only) (38-45)	QUANT	1TY (5461)	·	/83-83	(4 card only) (38-45).	CONCENT	RATION (54-61)		(62-63)	(64-68) FREQUENCY	SAMPLE
PARAM	ETER	٠.	MINIMUM	AVERAGE	MAXIMUM	UNITS	NO.	MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	OF ANALYSIS	TYPE
FLOW		REPORTED	.014	.079	236	MGD						0	30/30	24 hour continuo
		PERMIT				TOD								
OIL & C	REASE	REPORTED		0.13		LBS/						·		
		PERMIT CONDITION	3,3		9.3	DAY								
T.S.S.		REPORTED		0.20		LBS/			, i					; ·
		PERMIT .	9.0		18.0	DAY					· · ·			
C.O.D.		REPORTED		Ì					60.0		MG/L	0	1/30	24 hour composit
		PERMIT CONDITION							MONITOR		r			
PH		REPORTED							6.8		STD.	2	12/30	24 hour composit
		PERMIT						6.5		8.0	UNITS			
C.R.		REPORTED							<0.003		MG/L		1/90	24 hour composit
		PERMIT									1110/11			
:		REPORTED											······································	
		PERMIT										888		
		REPORTED		:										
		PERMIT												
NAME OF PRIN	CIPAL EXECUTIVE	OFFICER		F THE OFFICER		DATE				mation contained i		0	llores	215
DUBIEL,	Robert		Preside			04 212	report		est of my knowled,	te and belief such	infor 510	GNATUR	E OF PRINCIPAL R OR AUTHORIZ	L EXECUTIVE
A31	FIRST	MI		TITLE	YEAR	MO DAY						OF FIGE	CA AUTHORIZ	

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 Example: 2.5 MGD x 30 mg/l BOD x 8.34 = 625.5 lb BOD/day
 - c. MGD equals gallons per minute times 1440.
- 3. Enter units as appropriate.

MGD - million gallons per day

lb/day - pounds per day

mg/l - milligrams per liter

SU - standard units for pH

F - degrees fahrenheit

kg/day - kilograms/day = lb/day

2.2

(other units may be used as necessary)

- 4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "O". If there are any violations, send a letter of explanation.
- 5. Specify frequency of analysis as number of analyses/ number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly & 1/180 is semiannually) If continuous, enter "CONT"
- Specify sample type ("grab" or __hr. composite")
 If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

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ACUSHNET COMPANY RUBBER DIVISION

Manufacturers of Elastomeric Products

JUN 18 1991

June 14,1991

Environmental Protection Agency Permits Processing Section P.O. Box 8127 Boston, Ma. 02114

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES permit No. MA 0003913001 for the month of April 1991

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your a assistance.

Sincerely:

ACUSHNET COMPANY

Robert G. Morris

Environmental Compliance Specialist

OMB NO. 158-R0073

Facility or discharge location

Name

ACUSHNET COMPANY-RUBBER DIVISION-PLANT B

Street

744 Belleville Ave.

City

New Bedford

State/Zip code MA 02742

Telephone number (including area code) 508-997-2811

MA ST

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REPORTING PERIOD: FROM

(20-21) (22-23) (24-25)

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(32-37)		TEAR MO DA	<u> </u>							·		(64-64)	(69-70)
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PARAMETER .		MUMINIM	AVERAGE	MAXIMUM	UNITS	NO.	MINIMUM	AVERAGE	MAXIMUM	UNITS	NO.	ANALYSIS	TYPE
FLOW	REPORTED	.0045	.127	.201	MGD						0	30/30	24 hour continuo
	PERMIT CONDITION												
OIL & GREASE	REPORTED		0.4		LBS/				,		Transled	·	,
	PERMIT CONDITION	3,3		9.3	DAY								
T.S.S.	REPORTED		0.2	************	LBS/			*******************************		,	2000	***********	************
	PERMIT CONDITION	9,0		18.0	DAY					· ·			24 hour
C.O.D.	REPORTED		**********	c.::::::::::::::::::::::::::::::::::::			********	< 60	***********	MG/L	0	1/30	composit
	PERMIT							MONITOR		*			24 hour
PH.	REPORTED			*		2000	1905-2000-2000-200	6.8	*************	STD.	2	12/30	composi
	PERMIT						6.5		8.0	UNITS			24 hour
C.R.	REPORTED	***************************************				58353	888888888888888888888888888888888888888	<.003	*************	MG/L	02505	1/90	composi
	PERMIT									· ·			
	REPORTED	************************		****************	-	62.200x	500000000000000000000000000000000000000		************		525225	***************************************	***************************************
	PERMIT												
	REPORTED :	200000000000000000000000000000000000000		************		1925X		***************************************	************		1.75 V.	*************	
	CONDITION												
NAME OF PRINCIPAL EXECUTIVE		Preside	of THE OFFICER		DATE 1.4	I cert	ly that I am lamii and that to the h	lier with the infon	nation contained i	infor	U	USRE	
DUBIEL, Rober	- MI	FIESTGE	TITLE		0 6 14 DAY	mation	is true, complete	e, and accurate.		S		RE OF PRINCIPA	

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 Example: 2.5 MGD x 30 mg/l BOD x 8.34 = 625.5 lb BOD/day
 - c. MGD equals gallons per minute times 1/40.
- Enter units as appropriate.

MGD - million gallons per day
lb/day - pounds per day
mg/l - milligrams per liter
SU - standard units for pH
°F - degrees fahrenheit
kg/day - kilograms/day = 1b/day
2.2
(other units may be used as necessary)

- 4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "O". If there are any violations, send a letter of explanation.
- 5. Specify frequency of analysis as number of analyses/ number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly 6 1/180 is semiannually) If continuous, enter "CONT"
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Mail state copy to appropriate state agency and EPA copy to

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When supply of forms will be exhausted within 2 months, send reorder form or reproduce forms yourself.

CERTIFICATE OF ANALYSIS

JUN 18 1991

TO:

RobertsMoreis

SUBJECT:

ANALYZE THE 21 INCH OUTFALL FOR PH, TSS, COD, O+G AND

CHROMIUM

SAMPLE DESCRIPTION:

12 samples from the 21 inch outfall.

EXPERIMENTAL:

The above samples were composited and analyzed according to the procedures found in "standard methods". The above sample was analyzed on 5/6/91.

RESULTS:

PARAMETER	RESULTS
PH	6.8 (ave)
TSS	0.2 mg/l
COD	<60 mg/l
O+G	0.37 mg/l
CR	< 0.003 mg/l

Mark Wrigley

Review

REQUEST FOR ANALYTICAL SERVICES TITLEIST GOLF DIVISION

CA91-032 R

JUN TR 1931

REQUESTED BY:	Clarens		DATE. 4/-	19-91
DEPT.: 22/			_ EXT.:	·
PROJECT NAME/NUMBER:				
SUBJECT (WHAT/WHY):	PLEASE CHE	CK FOR	OH 755 0	COD,
oll acons	E AND MA	CMICM.		
				· · ·
SAMPLE DESCRIPTION:	12 Smare	ES FROM	17/E)	1 mell
PRIORITY: 2.7 6.8 6.8	6.7 6.8 6.9 6	.9 3.8 6.8	6.1 6.9 6.9	apinotamini, interfere explorition of
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SAMPLE DISPOSITION: All samples will b	e returned to	the requeste:	when the re	eport
is issued, except	for the follow	ing		to the second se
A) COMPET B) PATENT	TITIVE REPORT		TEST	
C) WATER				٠.
	ANALYTICAL DEP	r. USE		And Market State Control
ESTING PERFORMED	RESULTS	ANA)		EBOOK :
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ACUSHNET COMPANY RUBBER DIVISION

Manufacturers of Elastomeric Products

July 24,1991

JUL 29 1991

Environmental Protection Agency Permits Processing Section P.O. Box 8127 Boston,Ma. 02114

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES permit No. MA 0003913001 for the month of May, 1991

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your a assistance.

Sincerely:

ACUSHNET COMPANY

Robert G. Morris

Environmental Compliance Specialist

Name

ACUSHNET COMPANY-RUBBER DIVISION-PLANT B

Street

744 Belleville Ave.

City

New Bedford

State/Zip code MA 02742

Telephone number	(including	area	code)	508-997-	-2811
------------------	------------	------	-------	----------	-------

MA 5 T

0003913

001

REPORTING PERIOD: FROM

(20-21)	(22	- 2 3}	(24-	25)
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31	υ	၁	U	1
YEAR	м	0	DA	Y
	ı	_		

9 1 05 3 1 YEAR MO DAY see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory *The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

JUL 29 1991

	KEI OKTING P	ERIOD: FROM	YEAR MO DA	<u>+</u>	YEAR MO D	AY								
	(32-37)					 							(64-68)	(69-70)
Isw	PARAMETER .		(3 card only) (38-45)	QUANT (46-33)	1 TY (54-61)		(62-63)	(4 card only) (36-45)	CONCENT	RATION		(62-63)	FREQUENCY	SAMPLE
3	PARAMETER .		мимим	AVERAGE	MAXIMUM	מדואט	NO.	MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	ANALYSIS	TYPE
FL	OM :	REPORTED	.040	.085	.193	MGD						0		24 hour continuous
		PERMIT CONDITION												
OI	L & GREASE	REPORTED		0		LBS/				٠.		·		
		PERMIT	3,3		9.3	DAY								
T.	s.s.	REPORTED		0.07		LBS/	· ·					~ 000		
	,	PERM!T CONDITION	9.0		18.0	DAY								24 hour
c.	O.D.	REPORTED		*********			ক্রন্ত ক্র	1111111111111111111111111	4.97		MG/L	0	1/30	composite
		PERMIT							MONITOR		r , ,			24 hour
PH	L :	REPORTED		*************		3	5553	300000000000000000 0	7.3	***********	STD.	2	12/30	composite
/		CONDITION						6.5	_	8.0	UNITS		<u> </u>	24 hour
c.	R.	REPORJED PERMIT		***************************************	*************		2632	************	< 0.03		MG/L	83568	1/411	composite
		CONDITION												
		PERMIT				-			 					
		REPORTED										1000		
	Ļ	PERMIT												
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DUBI			Preside		9 1	0 7 2 4	report		est of my knowled	mation contained i ge and belief such	infor		E OF PRINCIPA	
LAST	FIRST	MI		TITLE	YEAR	MO DAY	L					OFFICE	R OR AUTHORIZ	ED AGENT

Read these instructions before completing form:

After reading and understanding instructions and forms, please return acknowledgement card.

Sampling and testing procedures should follow those published in 40 C.F.R. 136. These are basically <u>Standard Methods</u> or EPA procedures.

Forms should be completed in triplicate for each discharge with copy each for EPA, state and your records. If the state requires a more frequent submittal than EPA, collate EPA's copies and send as required.

Enter permittee name and facility address, PERMIT NUMBER, discharge number and reporting period. (A separate page is required for each discharge.)

For each parameter monitored during the reporting period, (either as a requirement of the permit or for own information) summarize the data as required in the permit and complete the form as follows:

- 1. Parameter column list parameter name.
- Enter minimum, average and maximum values for quantity and/or concentration under appropriate column headings.
 - a. If frequency is once per month or less, enter the one value under average and leave minimum and maximum blank.
 - b. 1b/day (pounds per day) equal_s flow (in million gallons per day) times concentration (in mg/l) times 8.34.
 Example: 2.5 MGD x 30 mg/l BOD x 8.34 = 625.5 lb BOD/day
 - c. MGD equals gallons per minute times 1/40.
- 3. Enter units as appropriate.

MGD - million gallons per day
lb/day - pounds per day
mg/l - milligrams per liter
SU - standard units for pH
°F - degrees fahrenheit
kg/day - kilograms/day = 1b/day
2.2
(other units may be used as necessary)

- 4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "O". If there are any violations, send a letter of explanation.
- 5. Specify frequency of analysis as number of analyses/ number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly & 1/180 is semiannually) If continuous, enter "CONT"
- Specify sample type ("grab" or "_hr. composite")
 If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

Mail state copy to appropriate state agency and EPA copy to

Environmental Protection Agency Permits Branch Box 8127 Boston, MA 02114

When supply of forms will be exhausted within 2 months, send reorder form or reproduce forms yourself.



CERTIFICATE OF ANALYSIS

June 20, 1991

TO:

Robert Morris

JUL 29 1991

SUBJECT:

MONTHLY ANALYSIS OF THE 21 INCH OUTFALL EFFLUENT WASTEWATER

SAMPLE DESCRIPTION:

12 samples from the 21 inch outfall.

DADAMETEDS

EXPERIMENTAL:

The above samples were composited and analyzed according to the procedures found in "Standard Methods". The samples were analyzed on 6/10/91.

RESULTS:

KESULTS
7.3 SU
0.0 mg/l
< 0.1 mg/l
4.97 mg/l
< 0.03 mg/l

Mark Wrigley

Paviow

NET COMPANY SER DIVISION

facturers of Elastomeric Products

July 24,1991

JUL 29 1991

Environmental Protection Agency Permits Processing Section P.O. Box 8127 Boston, Ma. 02114

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES permit No. MA 0003913001 for the month of June, 1991

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your a assistance.

Sincerely:

ACUSHNET COMPANY

Robert G. Morris

Environmental Compliance Specialist

Name

ACUSHNET COMPANY-RUBBER DIVISION-PLANT B

Street

744 Belleville Ave.

City

New Bedford

State/Zip code MA 02742

Telephone	number	(including	area	code)	508-997-2811
(2-3)	(4-16)		(17-19)		

MA 5 T

0003913 PERMIT NUMBER 001 DIS

REPORTING PERIOD: FROM

(20-21) (22-23) (24-25) 91 0 6 0 1

(26-27) (28-29) (30-31) 9 1 06 3 10

see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory *The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

JUL 29 1991

			YEAR MO DA		YEAR MO	DAY								
h	(32-37)		(3 card only)					(4 card only)					(64-66)	(69-70)
	PARAMETER		(38-45)	QUANT (46-53)	(54-6 I)	- 	(62-63)		CONCENT (46-53)	RATION		(62-63)	FREQUENCY	SAMPLE
			мимим	AVERAGE	MAXIMUM	UNITS	NO.	MINIMUM	AVERAGE	MAXIMUM ,	UNITS	NO. EX	ANALYSIS	TYPE
	FLOW	REPORTED	.047	.132	.238	MGD						0	30/30	24 hour continuo
	120	PERMIT												
	OIL & GREASE	REPORTED		0.11		LBS/				,				
1		PERMIT	3.3		9.3	DAY								
d d	T.S.S.	REPORTEO		0.11	,	LBS/	·		1		•			
		PERM:T CONDITION	9.0		18.0	DAY								
3(.) 54.	C.O.D.	REPORTED							60.0			0	1/30	24 hour composite
		PERMIT CONDITION				<u> </u>			MONITOR		MG/L •			
Å	PH	REPORTED							6.6		STD.	2	12/30	24 hour
•	,	PERMIT				<u> </u>		6.5		8.0	UNITS			
	C.R.	REPORTED							(0.002		MG/L		1/90	24 hour composite
		PERMIT				<u> </u>					110/11			
		REPORTED				-				,			· · · · · · · · · · · · · · · · · · ·	
		PERMIT CONDITION				<u> </u>								
		REPORTED								:				
		PERMIT				<u> </u>								
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	LAST FIRST	M1		TITLE	YEAR	MO DAY			·			OFFICE	N OR AUTHORIZ	ZU AUEN!

Read these instructions before completing form:

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Sampling and testing procedures should follow those published in 40 C.F.R. 136. These are basically <u>Standard Methods</u> or EPA procedures.

Forms should be completed in triplicate for each discharge with copy each for EPA, state and your records. If the state requires a more frequent submittal than EPA, collate EPA's copies and send as required.

Enter permittee name and facility address, PERMIT NUMBER, discharge number and reporting period. (A separate page is required for each discharge.)

For each parameter monitored during the reporting period, (either as a requirement of the permit or for own information) summarize the data as required in the permit and complete the form as follows:

- 1. Parameter column list parameter name.
- Enter minimum, average and maximum values for quantity and/or concentration under appropriate column headings.
 - a. If frequency is once per month or less, enter the one value under average and leave minimum and maximum blank.
 - b. lb/day (pounds per day) equal_s flow (in million gallons per day) times concentration (in mg/l) times 8.34.
 Example: 2.5 MGD x 30 mg/l BOD x 8.34 = 625.5 lb BOD/day
 - c. MGD equals gallons per minute times 1440.
- 3. Enter units as appropriate.

MGD - million gallons per day
lb/day - pounds per day
mg/l - milligrams per liter
SU - standard units for pH
°F - degrees fahrenheit
kg/day - kilograms/day = lb/day
2.2

(other units may be used as necessary)

- 4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "O". If there are any violations, send a letter of explanation.
- 5. Specify frequency of analysis as number of analyses/ number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly 6 1/180 is semiannually) If continuous, enter "CONT".
- 6. Specify sample type ("grab" or "_hr. composite") If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

Mail state copy to appropriate state agency and EPA copy to

Environmental Protection Agency Permits Branch Box 8127 Boston, MA 02114

When supply of forms will be exhausted within 2 months, send reorder form or reproduce forms yourself.

CERTIFICATE OF ANALYSIS

JUL 29 1991

TO:

Robert Morris

SUBJECT: Monthly water analysis of the 21 inch outfall effluent.

SAMPLE DESCRIPTION: 12 samples taken from the 21 inch outfall.

EXPERIMENTAL: The 12 samples were composited and analyzed according to the procedures found in "Standard Methods". The sample was analyzed on 6/25/91.

RESULTS:	Parameter	Results
	Ph	6.6 SU
	TSS	0.1 mg/l
	COD	<60.0 mg/l
:	O&G	<0.1 mg/l
	CR	<0.002 mg/l

REVIEW

ANALYSIS TIME - 8 hrs

ANALYSIS COST - 200.00



Manufacturers of Elastomeric Products

AUG 27 1991

Environmental Protection Agency Permits Processing Section P.O. Box 8127 Boston, Ma. 02114 August 26,1991

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES permit No. MA 0003913001 for the month of July, 1991

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your a assistance.

Sincerely:

ACUSHNET COMPANY

Robert G. Morris

Environmental Compliance Specialist

Name

ACUSHNET COMPANY-RUBBER DIVISION-PLANT B

Street

744 Belleville Ave.

City

New Bedford

State/Zip code MA 02742

Telephone number (including area code) 508-997-2811

MA ST

0003913

001

(20-21) (22-23) (24-25)

REPORTING PERIOD: FROM 9 1 0 7 0

91 0 7 3 1 YEAR MO DAY see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory *The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

AUG 27 1991

(32-37)	· ·	(3 card only)	QUANT	ITY			(4 cerd only)	CONCENT	RATION (54-61)			(64-68) FREQUENCY	[69-70]
PARAMETER .		(38-45) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX	(38-45) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO, EX	OF ANALYSIS	SAMPLE TYPE
FLOW	REPORTED	.014	.129	.238	MGD						0		24 hour continu
FLOW	PERMIT CONDITION				PAGD								
OIL & GREASE	REPORTED		0.64		LBS/						·		, ;
	PERMIT	343		9.3	DAY								
T.S.S.	REPORTED		0.32		LBS/	·							1
	PERM:T CONDITION	9.0		18.0	DAY								
C.O.D.	REPORTED							<60.0		MG/L	0	17.30	24 hour composi
	PERMIT .							MONITOR		*			
PH	REPORTED							7.0		STD.	2	12/30	24 hour composi
<u> </u>	CONDITION						6.5		8.0	UNITS	**		
C.R.	REPORTED			************	·			< 0.01		MG/L		1/90	24 hour composi
	CONDITION									110/11	9238 9900		
	REPORTED		·] -								
	PERMIT									. ;	XX.		
	REPORTED		· ·										
	PERMIT												
NAME OF PRINCIPAL EXECUTIVE		 	OF THE OFFICER		DATE				metion contained i			llace	er's
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CERTIFICATE OF ANALYSIS

JULY 1991

AUG 27 1991

TO:

Robert Morris

SUBJECT: The Monthly of Analysis the 21 inch Outfall effluent

wastewater.

SAMPLE DESCRIPTION: 12 sample bottles from the 21 inch outfall.

EXPERIMENTAL: The above samples were composited and analyzed according to the procedures found in "Standard Methods". The sample was analyzed on 8/06/91.

RESULTS:	Parameters	Results in mg/l
	Chromium	0.01
	Oil & Grease	0.60
	TSS	0.30
	COD	<60.0
	Ph	7.0

REVIÈW

ANALYSIS TIME - 8hrs

ANALYSIS COST - \$200.00



Manufacturers of Elastomeric Products

September 26, 1991

OCT 01 1991

Environmental Protection Agency Permits Processing Section P.O. Box 8127 Boston, MA 02114

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of $_{\rm August}$ 1991.

Schould you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY

John J. Bailey, Jr., C.S.P. Director of Risk Management

and Environmental Affairs

/rg

Enc.

CERTIFICATE OF ANALYSIS

OCT 01 1991

TO: Robert Morris

SUBJECT: 21-Inch Outfall

SAMPLE DESCRIPTION

Twelve sample bottles from the 21-inch outfall.

EXPERIMENTAL

The samples were analyzed according to the methods found in "Standard Methods". The analysis took place on 9/16/91.

RESULTS

pH 7.1

TSS 1.7 mg/L

Oil & Grease 0.8 mg/L

COD <60 mg/L

Cr 0.0 mg/L

REVIEW

ANALYSIS TIME -

ANALYSIS COST -

Name ACUSHNET COMPANY

ACUSHNET COMPANY-RUBBER DIVISION-PLANT B

Street

744 Belleville Ave.

REPORTING PERIOD: FROM

City

New Bedford

State/Zip code MA 02742

Telephone number (including area code) 508-997-2811

MA sr

0003913

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9 1 0 8 0 1 YEAR MO DAY 9 1 0 8 30 YEAR MO DAY see INSTRUCTIONS on back

Remarks Fitleist Golf Division Laboratory
*The 12 open container grab samples were
collected over the sampling day and examined,
then combined into one composite sample for
analysis

		(3 card only) 138-451	QUANT	TTY (8461)	-		(4 cerd only) (30-46)	CONCENT	RATION (64-61)		(62-63)	FREQUENCY	SAMPLE
PARAMETER		MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	OF ANALYSIS	TYPE
FLOW	REPORTED	.062	.142	.251	MGD						0	30/30	24 hour continu
	PERMIT CONDITION												
OIL & GREASE	REPORTED		.0 <u>L</u>	.948	LBS/								
	PERMIT CONDITION	3,3		9.3	DAY								
T.S.S.	REPORTED		0. 人	-2.01	LBS/								
	PERM: T CONDITION	9,0		18,0	DAY								
C.O.D.	REPORTED		1					5 60.0		MC /T	0	1/30	24 hou compos
	PERMIT				<u></u>			MONITOR		MG/L			
PH	REPORTED							<u> </u>		STD.	2	12/30	24 hou compos
	PERMIT				<u> </u>		6.5		8.0	UNITS			
C.R.	REPORJED					-		0.0	•	MG/L		1/90	24 hou
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Manufacturers of Elastomeric Products

November 5, 1991

NOV 12 1991

Environmental Protection Agency Permits Processing Section P.O. Box 8127 Boston, MA 02114

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

John J. Bailey, Jr., C.S.P.

Director of Environmental Affairs

/rg JB91/132

Name I

ACUSHNET COMPANY-RUBBER DIVISION-PLANT B

Street

744 Belleville Ave.

City

New Bedford

State/Zip code MA 02742

Telephone number (including area code) 508-997-2811

MA sr

0003913

001

DM 9 11 0 19 01

9 1 09 3 0 YEAR MO DAY see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were
collected over the sampling day and examined,
then combined into one composite sample for
analysis

(32-37)		(3 card only) (38-45)	QUANT	1TY (54-61)			(4 card only) (38-45)	CONCENT	RATION		(62-63)	FREQUENCY	SAMPLE
PARAMETER		мінімим	AVERAGE	MAXIMUM	UNITS	NO.	MINIMUM	AVERAGE	MAXIMUM	UNITS	NO.	OF ANALYSIS	TYPE
FLOW	REPORTED	.0827	.119	.194	MGD						0		24 hour continu
	PERMIT CONDITION										***		
OIL & GREASE	REPORTED		0.0		LBS/								
	. PERMIT CONDITION	3,3		9.3	DAY								
T.S.S.	REPDRIED		.0002		LBS/								
1.0.0.	PERM: T CONDITION	9,0		18,0	DAY								
C.O.D.	REPORTED							< 60		MG/L	0	1/30	24 hour composi
	PERMIT CONDITION							MONITOR		MG/L			
PH	REPORTED							7.1		STD.	2	12/30	24 hour
	PERMIT CONDITION						6.5		8.0	UNITS	**		
C.R.	REPORTED							₹0.02		MG/L		1/90	24 hour composi
	PERMIT CONDITION									1.0, 2	200		
	REPORTED									}			
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Manufacturers of Elastomeric Products

December 2, 1991

DEC 11 1991

Environmental Protection Agency Permits Processing Section P.O. Box 8127 Boston, MA 02114

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of October.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

John J. Bailey, Jr., C.S.P.

Director of Environmental Affairs

/rg JB91/132

To all the of hour of

Name

ACUSHNET COMPANY-RUBBER DIVISION-PLANT B

Street

744 Belleville Ave.

City

New Bedford State/Zip code MA 02742

Telephone number (including area code) 508-997-2811

MA 0003913 ST PERMIT NUMBER

001 DIS

REPORTING PERIOD: FROM

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(26-27) (28-29) (30-31)

WQTIONS on back

Remarks Titleist Golf Division Laboratory *The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

(32-37)		(3 card only)		 -			(4 cerd only)		RATION			FREQUENCY	100-701	
PARAMETER		138-45) (46-53) (54-61) (6				(6 2 - 63)	138-45)		(62-63)		SAMPLE			
	<u> </u>	MINIMUM	AVERAGE	MUMIXAM	UNITS	NO. EX	MINIMUM	AVERAGE	MUMIXAM	UNIT\$	NO. EX	ANALYSIS	TYPE	
FLOW	REPORTED	0.0	0.0408	0.180	MGD						0	30/30	24 hour continu	
	PERMIT CONDITION				כופייו						_			
OIL & GREASE	REPORTED		0.0		LBS/									
	PERMIT CONDITION	3.3		9.3	DAY									
T.S.S.	REPORTED		0.068		LBS/									
	PERM: T CONDITION	9.0		18.0	DAY									
C.O.D.	HEPOHTED							< 60		MG/L	0	1/30	24 hour composi	
	PERMIT							MODITOR						
PH	REPORTEO							6.8		STD.	2	12/30	24 hour composi	
	PERMIT						6.5		8,0	UNITS	3			
C.R.	REPORTED						·	< 0.1	•	MC /T	MG/L		1/90	24 hour composi
	PERMIT CONDITION									1483/11	288			
	REPORTED													
····	PERMIT CONDITION					\$								
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	PERMIT												VX.	
NAME OF PRINCIPAL EXECUTI	VE OFFICER	TITLE	OF THE OFFICER		DATE	1 60	tily that I am lam	iliar with the Info	metion contained	in this	11/	1/3	11 11	
DUBIEL, Robe		President 9 1			12 0 2	tebot		beet of my knowled		SICH Y TU	RE OF PRINCIP	VI EXECOLDE		
AST FIRST	MI		TITLE	YEAR	MO DAY	<u> </u>					OFFIC	ER ON AUTHOR	ZED AGENT	



Manufacturers of Elastomeric Products

December 2, 1991

DEC 23 1991

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Environmental Protection Agency Permits Processing Section P.O. Box 8127 Boston, MA 02114

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of November 1991.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerety,

John J. Bailey, Jr., C.S.P.

Director of Environmental Affairs

/rg JB91/132

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TOTAL DEPTH COMPANY DET

Name

ACUSHNET COMPANY-RUBBER DIVISION-PLANT B

Street

744 Belleville Ave.

City

New Bedford

State/Zip code MA 02742

Telephone number (including area code) 508-997-2811

MA 0003913

ST PERMIT NUMBER

001

REPORTING PERIOD: FROM

9 11 1 0 1 YEAR MO DAY 9 11 1 1 30 YEAR MO DAY

ΤO

see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were
collected over the sampling day and examined,
then combined into one composite sample for
analysis

DEC 23 1991

(33-37)	T	(J card only)	QUANT	ITY (8401)			(4 cord only)	CONCENT	ATION (54-41)	·	(62-63)	FREQUENCY	SAMPLE
PARAMETER		мінімим	AVERAGE	MAXIMUM	UNITS	NO. EX	MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	OF ANALYSIS	TYPE
FLOW	пероптео	0	.041	.180	MGD			,	1		0	30/30	24 hour contin
	PERMIT CONDITION				כנמיו								
OIL & GREASE	REPORTED		0.0		LBS/							~	
	PERMIT CONDITION	3,3		9.3	DAY								
T.S.S.	REPORTED		0.31		LBS/		· ,						
	PERM:T CONDITION	9,0		18,0	DAY					· ,	40		
C.O.D.	REPORTEO							187		MC /T	0	1/30	24 hou compos
	PERMIT CONDITION							MODITOR		MG/L			
PH	REPORTED							6.75		STD.	2	12/30	24 hou compos
	PERMIT CONDITION						6.5		8.0	UNITS			
C.R.	REPORTED							<.02		MG/L		1/90	24 hou
***************************************	PERMIT										22.08		
	REPORTED							ļ	1	ļ			·
	PERMIT CONDITION				:	8							
	REPORTED											<u> </u>	
	PERMIT CONDITION									11	· Si		
HANE OF PRINCIPAL EXECUTI		·	OF THE OFFICER		DATE	1 cor	lly that I am fami	lier with the Info	metion contained	in this	1.1	1/2/11	. I.M.
OUBIEL, Rober	ct	President			1 2 1 6	repor		est of my knowled	ge and bollet such	Intor 1	CHATO.	King to J.	Lexicuity
\$T FIRST	WI		TITLE	YEAR	MO DAY	1		-,			OFFICE	INOHTUA APRI	S/FO/VCENA



Manufacturers of Elastomeric Products

FEB 1 2 1992

February 6, 1992

Environmental Protection Agency Permits Processing Section P.O. Box 8127 Boston, MA 02114

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of

DECEMBER 1991

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

John J. Bailey, JH., C.S.P.

Director of Environmental Affairs

/cc JB92/38

Name

ACUSHNET COMPANY-RUBBER DIVISION-PLANT B

Street

744 Belleville Ave.

City

New Bedford

State/Zip code MA 02742

Telephone number (including area code) 508-997-2811.

MA sr

0003913

001

REPORTING PERIOD: FROM 911 1 2 3

9 1 1 2 3 1 YEAR MO DAY see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory
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RED LANDON !

PARAMETER		(3 card only) (31 - 45)	QUANT	1TY 18+011		103-63	(4 cerd only) 138:481	CONCENT	RATION		101-11	THEQUENCY OF	SAMPL
PARAMETER		инини	AVERAGE	MAXINUM	טאודג	ND. EX	мінім	AVERAGE	MAXIMUM	UNITS	NO. EX	AHALYSIS	TYPE
FLOW	REPORTED	.001	.048	.152	MGD						0	30/30	24 hou conti
E 170M	PEHHIT CONDITION				רובאיו								
OIL & GREASE	AEPOATED		0.242		LBS/								
	PEHMIT	3.3		9.3	DAY								
T.S.S.	REPORTED		0.242		LBS/								
	P E RM; T	9,0		18,0	DAY						18.3		
C.O.D.	REPORTED							3.7		MC /T	0	1/30	24 ho compo
	PERMIT CONDITION							MODITOR		MG/L			
PH	REPORTED							7.0		STD.	2	12/30	24 ho
	PERMIT CONDITION						6.5		8.0	UNITS			
C.R.	REPOHJED							<0.002	•	MG/L		1/90	24 ho
	PERMIT									110711	. X X		
	REPORTED												
	PEHMIT CONDITION				,	.5 .5							
	REPORTED												1
	PERMIT CONDITION									11		<u></u> Λ	
NAME OF PRINCIPAL EXECUTIVE	OFFICER	TITLE	OF THE OFFICER		DATE	I cort	lly that I am Iami	lier with the Info	mellon confeined i	, a.i.	l', V	1. an 1.11	11/1
DE MELLO, JAMES		EXEC. V	.P.		02 96	10101	•	ert of my knowled	yn aud bollaf auch	1 1/1/10	\$	Maria	1KH